

Parcel ID # _____

Permit #: _____

Date: _____

**TOWN OF INDIAN RIVER SHORES
BUILDING DEPARTMENT**

BUILDING PERMIT APPLICATION

CONTRACTOR MAILING ADDRESS ZIP PHONE # FAX#

JOB ADDRESS LOT # SUBDIVISION

OWNER MAILING ADDRESS ZIP PHONE #

☐ NEW ☐ ADDITION ☐ ALTERATION ☐ REPAIR/REPLACE ☐ REMOVE
SINGLE or MULTI FAMILY / DUPLEX

WORK VALUE SQ FOOTAGE TOTAL CONSTRUCTION TYPE: ☐ STEEL ☐ CBS ☐ FRAME

WATER SIZE CONN. BEDROOMS/BATHS GARAGE SIZE / () CAR GAR. ROOF SQUARES

BUILDING _____
SETBACKS: FRONT SIDE SIDE REAR **POOL** _____
SETBACKS: FRONT SIDE SIDE REAR

AIR CONDITIONING _____
 TYPE FUEL **DOMESTIC HOT WATER:** _____
 FUEL **POOL HEATER** _____
 FUEL

SPECIAL FLOOD HAZARD AREA: YES _____ NO _____ **FLOOD ZONE:** _____ **BFE** _____

Required Lowest Floor _____ NGVD

New Construction: _____

Substantial Improvements: _____

NAME OF SUB-CONTRACTOR

(1) Excavator: _____
(2) Concrete: _____
(3) Cement: _____
(4) Carpenter: _____
(5) Insulation: _____
(6) Drywall: _____
(7) Painting: _____
(8) Glazing: _____
(9) Stucco: _____
(10) Mason: _____

(11) Tile-Terrazzo: _____
(12) Plumbing: _____
(13) Electrical: _____
(14) Heating: _____
(15) Air Conditioning: _____
(16) Roof: _____
(17) Sheet Metal: _____
(18) Security: _____
(19) Gas: _____
(20) Other: _____

SEE BUILDING PERMIT FEES "SCHEDULE A"

BUILDING PERMIT FEE:\$ _____
PLAN CHECKING FEE:\$ _____
COUNTY TRAFFIC IMPACT FEE:\$ _____
FIRE REVIEW FEE:\$ _____

BIKE PATH IMPROV:\$ _____
RADON GAS:\$ _____
OFF SITE DRAINAGE:\$ _____
RE-SUB FEE:\$ _____

**FLORIDA STATE STATUTES SECTION 1. SUBSECTION (10) OF SECTION 553.79-
APPLICATION – READ:**

(10) “Notice: in addition to the requirements of this permit, there may be additional restrictions applicable to this property that may be found in the public records of this county, and there may be additional permits required from other governmental entities such as water management districts, state agencies or federal agencies.”

The enforcing shall require each building permit for the demolition or renovation of an existing structure to contain an asbestos notification statement which indicates the owner’s or operators responsibility to comply with the provisions of 469.002 and to notify the Department of Environmental Regulations of his intentions to remove asbestos, when applicable, in accordance with the state and federal law.

Application is hereby made to obtain a permit to do the work and installations as indicated. I certify that no work or installation has commenced prior to the issuance of a permit and that all work will be performed to meet the standards of all laws regulating construction in this jurisdiction. I understand that a separate permit must be secured with ELECTRICAL WORK, PLUMBING, SIGNS, WELLS, POOLS, FURNACES, BOILERS, HEATERS, TANKS, AND AIR CONDITIONERS ETC.

OWNER’S AFFIDAVIT: I CERTIFY THAT ALL THE FOREGOING INFORMATION IS ACCURATE AND THAT ALL WORK WILL BE DONE IN COMPLIANCE WITH ALL APPLICABLE LAWS REGULATING CONSTRUCTION AND ZONING.

***WARNING TO OWNER: YOUR FAILURE TO RECORD A NOTICE OF
COMMENCEMENT MAY RESULT IN YOUR PAYING TWICE FOR IMPROVEMENTS
TO YOUR PROPERTY. IF YOU INTEND TO OBTAIN FINANCING, CONSULT WITH
YOUR LENDER OR AN ATTORNEY BEFORE RECORDING YOUR NOTICE OF
COMMENCEMENT.***

Signature: **X** _____
Owner

Sworn to and subscribe before me
by _____
who is personally known to me or produced
_____ as
identification, this _____ day
of _____ 20_____.

Notary Signature: _____
Printed name of Notary _____
Commission No/Exp _____
Affix Seal:

Signature: **X** _____
Contractor (Qualifier)

Sworn to and subscribe before me
by _____
who is personally known to me or produced
_____ as
identification, this _____ day
of _____ 20_____.

Notary Signature: _____
Printed name of Notary _____
Commission No/Exp _____
Affix Seal